### Case 17-10390 Doc 1 Filed 09/08/17 Entered 09/08/17 10:15:18 Desc Main Document Page 1 of 70

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jennifer First name  Lee  Middle name	First name  Middle name	
	Bring your picture identification to your meeting with the trustee.	Plyler Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4813		

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Case number (if known)

Debtor 1 **Jennifer Lee Plyler** 

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Ви	usiness name(s)			
		EINs		Ns			
5.	Where you live	12635 Big Laurel Road	lf I	Debtor 2 lives at a different address:			
		Marshall, NC 28753  Number, Street, City, State & ZIP Code	Nu	Number, Street, City, State & ZIP Code			
		Madison					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in	Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Nu	umber, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	CI	heck one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 **Jennifer Lee Plyler** 

ar	Tell the Court About	Your B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7							
		☐ Cl	hapter 11						
		☐ CI	hapter 12						
		☐ CI	hapter 13						
3.	How you will pay the fee	_	about how yo	u may pay. Typ attorney is subr	en I file my petition. Plea ically, if you are paying the mitting your payment on y	he fee yourself, you ma	ay pay with cash, cashi	er's check, or money	
					allments. If you choose s (Official Form 103A).	this option, sign and at	tach the Application for	r Individuals to Pay	
			but is not req	uired to, waive y	ived (You may request to your fee, and may do so ad you are unable to pay	only if your income is le	ess than 150% of the o	fficial poverty line that	
					Chapter 7 Filing Fee Wai				
9.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye							
			District		When				
			District		When _ When		Case number		
			District		vvnen _		Case number		
10.	Are any bankruptcy cases pending or being	■ No	)						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.						
			Debtor			F	Relationship to you		
			District		When		Case number, if known		
			Debtor				Relationship to you		
			District		When _	(	Case number, if known		
11.	Do you rent your residence?	■ No	Go to I	ne 12.					
		☐ Ye	es. Has yo	ur landlord obta	ained an eviction judgme	nt against you and do y	ou want to stay in your	residence?	
				No. Go to line	12.				
				Yes. Fill out <i>Ini</i> bankruptcy pet	itial Statement About an l ition.	Eviction Judgment Aga	inst You (Form 101A) a	and file it with this	

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Deb	tor 1 Jennifer Lee Plyle		D0C 1	Document Page 4 of 70  Case number (if known)			
Part	Report About Any Bu	usinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code			
	it to this petition.		Check	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriatines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced U.S.C. 1116(1)(B).				
	For a definition of <i>small</i>	■ No.	I am n	oot filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	r Have An	y Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and		What is t	the hazard?			

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jennifer Lee Plyler

Case number (if known)

### 15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Jennifer Lee Plyle	r	Document	Paye 0 01 70	Case number (if F	known)		
Part	6: Answer These Quest	ions for Rep	orting Purposes					
16.	What kind of debts do you have?		re your debts primarily consum dividual primarily for a personal, f	umer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an I, family, or household purpose."				
			No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	tate the type of debts you owe that	at are not consumer de	ebts or business de	ebts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do you re paid that funds will be available			is excluded and administrative expenses		
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		] Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000		
	you estimate that you owe?	□ 50-99		□ 5001-10,000		50,001-100,000		
		□ 100-199 □ 200-999		10,001-25,000		☐ More than100,000		
19.	How much do you	□ \$0 - \$50;	,000	□ \$1,000,001 - \$10	million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50	) million	☐ \$1,000,000,001 - \$10 billion		
			1 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>\$500,00</b>	1 - \$1 million	<b>—</b> \$100,000,001 - \$0	JOO ITIIIIIOIT	Li More than \$50 billion		
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10	million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		- \$100,000	□ \$10,000,001 - \$50		\$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$10 □ \$100,000,001 - \$5		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		\$500,00	1 - \$1 million	Φ 100,000,001 - ψ0		I Wore than \$50 billion		
Part	7: Sign Below							
For	you	I have exam	nined this petition, and I declare u	nder penalty of perjury	that the information	on provided is true and correct.		
			osen to file under Chapter 7, I am es Code. I understand the relief av			ler Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request rel	request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankruptcy and 3571.	case can result in fines up to \$250			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519		
		/s/ Jennifer L	er Lee Plyler Lee Plyler	Sign	ature of Debtor 2			
		Signature of		5.9.1				
		Executed or		Exec	cuted on			
			MM / DD / YYYY		MM / DI	D/YYYY		

Debtor 1 Jennifer Lee Plyler Document Page 7 of 70 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	ney Kight, Jr. Attorney for Debtor	Date	September 8, 2017	
D. Rodney	Kight, Jr.			
Kight Law Firm name	Office			
56 College Suite 302	Street			
Asheville,	NC 28801			
Number, Street,	City, State & ZIP Code			
Contact phone	(828) 255-9881	Email address	info@kightlaw.com	
26453				
Bar number & St	tate			

		1200:11111	till Page 8 OF 70	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jennifer Lee Plyl	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (	DF NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	550,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	159,960.58
	1c. Copy line 63, Total of all property on Schedule A/B	\$	709,960.58
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	539,469.62
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,607.51
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	449,459.97
	Your total liabilities	\$	991,537.10
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,239.30
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	11,948.53
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a persona	l, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Debtor 1 Jennifer Lee Plyler Document Page 9 of 70
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

14,440.74

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,607.51
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	197,419.75
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	200,027.26

	Ca	se 17-1039	0 Doc 1 I		09/08/17 cument	Entered 09/08/	17 10:15:18	Des	c Main		
Fill	in this inform	nation to identify	your case and th			FAUE TO ULTU					
Deb	otor 1	Jennifer Lee	Pivier								
		First Name		Name		Last Name					
	otor 2 use, if filing)	First Name	Middle	Name		Last Name					
					ICT OF NODE						
Unit	ed States Bar	nkruptcy Court for	the: WESTERN	אופוטו	ICT OF NOR	TH CAROLINA					
Cas	e number					_		[		if this is an ed filing	
SC n ea hink nfor	chedule ch category, se it fits best. Be mation. If more	as complete and space is needed,	roperty escribe items. List a accurate as possible	e. If two	married people	an asset fits in more than or e are filing together, both ar e top of any additional page	e equally responsil	ble for sup	plying corre	ct	
	ver every quest		uilding, Land, or Otl	her Real	Estate You Ov	vn or Have an Interest In					
						, land, or similar property?					
			juitable liiterest iii a	illy resid	erice, building,	, land, or similar property?					
_	No. Go to Part										
_	Yes. Where is	the property?									
1.1				What	is the property	? Check all that apply					
	12635 Big				Single-family I	home	Do not deduct se				
	Street address, r	f available, or other des	scription		Duplex or mul	<del>-</del>		he amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
				Condominium or cooperative				, , ,			
					Manufactured	or mobile home		• • •			
	Marshall	NC	28753-0000		Land		Current value of entire property		Current value portion you		
	City	State	ZIP Code		Investment pr	operty	\$550,0	00.00	\$55	50,000.00	
					Other	t in the property? Check one	Describe the na (such as fee single a life estate), if	nple, tenai			
				Wild		In the property? Check one	Fee simple/				
	Madison				Debtor 2 only						
	County				Debtor 1 and	Debtor 2 only	— Chack if th	is is comm	unity prope	rts.	
					At least one o	f the debtors and another	(see instruction		iumity prope	ity	
					r information y erty identificati	ou wish to add about this ito on number:	em, such as local				
						R, 3.5 BA home with livith spouse. Value bas			ltor.		
_	A					inam Dant 4 Imaliadis si sis					

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$550,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	ennifer Lee	Plyler	Document Page 11 of 70 Case r	number (if known)	
3.	Cars, vans,	trucks, trace	tors, sport utility ve	nicles, motorcycles		
	□ No					
	Yes					
3	3.1 Make:	Toyota		Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
	Model:	Sequoia	Ltd 4WD	Debtor 1 only		re Claims Secured by Property.
	Year:	2011		Debtor 2 only	Current value of the	
		nate mileage: formation:	80,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
			s the NADA	☐ At least one of the debtors and another		
		etail value.		☐ Check if this is community property (see instructions)	\$26,150	\$26,150.00
	■ No □ Yes		·	tercraft, fishing vessels, snowmobiles, motorcycle acce	Г	
<u> </u>				hat number here		\$26,150.00
			nal and Household Ite			
	·	·		erest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.		,	urnisnings ices, furniture, linens,	china, kitchenware		
			Dining room set washer, dryer, li garden tools, co		ces,	fp 400 00
			Owned jointly w	ith spouse.		\$8,100.00
7.		Televisions a including cell	nd radios; audio, vide phones, cameras, m	eo, stereo, and digital equipment; computers, printers, s edia players, games	scanners; music co	ollections; electronic devices
8.		Antiques and other collection	figurines; paintings, ons, memorabilia, col	prints, or other artwork; books, pictures, or other art objudectibles	ects; stamp, coin,	or baseball card collections;
9.	Equipment Examples:	for sports and Sports, photo musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables, golf clu	ıbs, skis; canoes a	nd kayaks; carpentry tools;
	— 165. De	301 IDE				
			stilts, pogo stic	k, long board and paddle		\$300.00

Case 17-10390 Doc 1 Filed 09/08/17 Entered 09/08/17 10:15:18 Desc Main Document Page 12 of 70 Debtor 1 Jennifer Lee Plyler Case number (if known) \$140.00 22 rifle 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$500.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$1,900.00 diamond rings; misc costume 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$10,940.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$0.00 **Agricultural FCU** Checking - 975

Official Form 106A/B Schedule A/B: Property page 3

Wells Fargo

17.2.

Checking - 2506

\$15.17

	Case 17-103		1 09/06/17 Ellieled 09/06/17 10.15.16 DeSC	Main
Debtor 1	Jennifer Lee Ply	rler	cument Page 13 of 70 Case number (if known)	
	1	Joint Checking - 7.3. 2180	Wells Fargo	\$10.69
	1	Line of Credit 7.4. Checking - 3286	M&T Bank	\$1,911.56
	1	Joint checking - 7.5. <b>3294</b>	M&T Bank	\$29.90
	1	7.6.	Wells Fargo Bank savings #0976	\$0.00
	1	7.7. Checking	M&T Bank	\$174.67
Exam ■ No		ublicly traded stocks estment accounts with broke	erage firms, money market accounts	
19. <b>Non-p</b>			ated and unincorporated businesses, including an interest in an LL	C, partnership, and
■ No				
☐ Yes.	Give specific informa	ation about them Name of entity:	% of ownership:	
Nego Non-r ■ No	<i>tiable instrument</i> s incl	ude personal checks, cashie are those you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them.	
	ment or pension acc ples: Interests in IRA,		e(b), thrift savings accounts, or other pension or profit-sharing plans	
_	List each account se T	parately. Type of account:	Institution name:	
	II	RA	Spire	\$234.85
	Т	hrift Savings Plan	Thrift Savings Plan	\$119,500.24
Your : Exam		posits you have made so th	nat you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companies, or oth	ers
■ No □ Yes.			Institution name or individual:	
23. <b>Annui</b>	ties (A contract for a p	periodic payment of money	to you, either for life or for a number of years)	
■ No □ Yes.	Issuer	name and description.		
	ets in an education IF .C. §§ 530(b)(1), 529A		lified ABLE program, or under a qualified state tuition program.	
□ Yes	Institut	tion name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Jennifer Lee Plyler	Document	Page 14 of 70  Case number (if known)	
		y (other than anythir	ng listed in line 1), and rights or powers exerc	cisable for your benefit
■ No □ Yes	. Give specific information about them			
	ts, copyrights, trademarks, trade secrets	•		
■ No □ Yes	. Give specific information about them			
	ses, franchises, and other general intang aples: Building permits, exclusive licenses, o		n holdings, liquor licenses, professional licenses	3
	. Give specific information about them			
Money or	r property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax re</b>	efunds owed to you			·
■ No □ Yes	. Give specific information about them, inclu	uding whether you alre	eady filed the returns and the tax years	
■ No		al support, child supp	ort, maintenance, divorce settlement, property s	ettlement
Exam ■ No	amounts someone owes you  apples: Unpaid wages, disability insurance pa benefits; unpaid loans you made to so  . Give specific information		efits, sick pay, vacation pay, workers' compens	ation, Social Security
	sts in insurance policies  nples: Health, disability, or life insurance; he	alth savings account (	HSA); credit, homeowner's, or renter's insuranc	e
	. Name the insurance company of each poli Company name:	icy and list its value.	Beneficiary:	Surrender or refund value:
	Nationwide Life Whole life	Insurance policy -		\$993.50
If you some	nterest in property that is due you from s are the beneficiary of a living trust, expect one has died.  . Give specific information		ed surance policy, or are currently entitled to receive	ve property because
Exam ■ No	s against third parties, whether or not youngles: Accidents, employment disputes, insu			
■ No	contingent and unliquidated claims of e  . Describe each claim	very nature, includin	g counterclaims of the debtor and rights to s	set off claims
	nancial assets you did not already list			

	Case 17-10390	Doc 1	Filed 09/08/17 Document	Entered 09 Page 15 of	9/08/17 10:15:18 70_	Desc Main
Debtor 1	Jennifer Lee Plyler				Case number (if known)	
☐ Ye	s. Give specific information					
	d the dollar value of all of yo Part 4. Write that number he					\$122,870.58
Part 5:	Describe Any Business-Related	Property You	Own or Have an Interest	In. List any real esta	ate in Part 1.	
37. <b>Do yo</b>	u own or have any legal or equi	table interest	in any business-related p	roperty?		
■ No.	Go to Part 6.					
☐ Yes	. Go to line 38.					
	Describe Any Farm- and Comme If you own or have an interest in fa			n or Have an Interes	st In.	
46. <b>Do y</b>	ou own or have any legal or	equitable in	terest in any farm- or	commercial fishir	g-related property?	
	lo. Go to Part 7.	•	·			
□Y	es. Go to line 47.					
Part 7:	Describe All Property You	Own or Have a	ın Interest in That You Did	d Not List Above		
	ou have other property of a					
	mples: Season tickets, country	y club membe	ership			
■ No						
⊔ те	s. Give specific information					
54. <b>Ad</b>	d the dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here		\$0.00
· · · · · ·						
Part 8:	List the Totals of Each Part of	of this Form				
	rt 1: Total real estate, line 2					\$550,000.00
	rt 2: Total vehicles, line 5			\$26,150.00		
	rt 3: Total personal and hous		s, line 15	\$10,940.00		
	rt 4: Total financial assets, li		_	\$122,870.58		
	rt 5: Total business-related p	• •		\$0.00		
	rt 6: Total farm- and fishing-			\$0.00		
61. <b>Pa</b> ı	rt 7: Total other property not	listed, line t	54 +	\$0.00		
62. <b>Tot</b>	tal personal property. Add lin	es 56 throug	h 61	\$159,960.58	Copy personal property to	otal <b>\$159,960.58</b>
63. <b>To</b> t	al of all property on Schedu	ıle A/B. Add I	ine 55 + line 62			\$709,960.58

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Jennifer Lee Plyle	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	DF NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	u Claim a	s Exempt
---------	----------	---------	-----------	-----------	----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
12635 Big Laurel Rd. Marshall, NC 28753 Madison County Residence: 4 BR, 3.5 BA home with barn on 12.5 acres Owned jointly with spouse. Value based on consult with realtor.  Line from Schedule A/B: 1.1	\$550,000.00		\$32,530.38  100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(1)	
2011 Toyota Sequoia Ltd 4WD 80,000 miles	\$26,150.00		\$3,500.00	N.C. Gen. Stat. § 1C-1601(a)(3)	
The value listed is the NADA clean retail value.  Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
2011 Toyota Sequoia Ltd 4WD 80,000 miles	\$26,150.00		\$650.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
The value listed is the NADA clean retail value.			100% of fair market value, up to any applicable statutory limit		

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Case number (if known) Debtor 1 Jennifer Lee Plyler Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Living Room furniture and standard N.C. Gen. Stat. § 1C-1601(a)(4) \$8,100.00 \$4.050.00 appliances/electronics, TVs, Dining room set, bedroom suites, misc 100% of fair market value, up to small kitchen appliances, washer, any applicable statutory limit dryer, linens, pots & pans, dishes, outdoor furniture, small garden tools, computer, Owned jointly with spouse. Line from Schedule A/B: 6.1 stilts, pogo stick, long board and N.C. Gen. Stat. § 1C-1601(a)(4) \$300.00 \$300.00 paddle Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit 22 rifle N.C. Gen. Stat. § 1C-1601(a)(4) \$140.00 \$140.00 Line from Schedule A/B: 9.2 100% of fair market value, up to any applicable statutory limit Clothing N.C. Gen. Stat. § 1C-1601(a)(4) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit diamond rings; misc costume N.C. Gen. Stat. § 1C-1601(a)(2) \$1,900.00 \$1,900.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Checking - 975: Agricultural FCU N.C. Gen. Stat. § 1C-1601(a)(2) \$0.00 \$0.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking - 2506: Wells Fargo N.C. Gen. Stat. § 1C-1601(a)(2) \$15.17 \$15.17 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Joint Checking - 2180: Wells Fargo N.C. Gen. Stat. § 1C-1601(a)(2) \$10.69 \$5.35 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Line of Credit Checking - 3286: M&T N.C. Gen. Stat. § 1C-1601(a)(2) \$1,911.56 \$1,911.56 **Bank** Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit Joint checking - 3294: M&T Bank N.C. Gen. Stat. § 1C-1601(a)(2) \$29.90 \$14.95 Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit

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Case number (if known)

De	Dioi 1 Jeilillei Lee Flylei					
Brief description of the property and line of Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Wells Fargo Bank savings #0976	\$0.00		\$0.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
	Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit		
	Checking: M&T Bank Line from Schedule A/B: 17.7	\$174.67		\$174.67	N.C. Gen. Stat. § 1C-1601(a)(2)	
	Ellie Holli Gollodale 775.			100% of fair market value, up to any applicable statutory limit		
	IRA: Spire Line from Schedule A/B: 21.1	\$234.85		\$234.85	N.C. Gen. Stat. § 1C-1601(a)(9)	
	Ellie Holli Golledale 74 B. 2111			100% of fair market value, up to any applicable statutory limit		
	Thrift Savings Plan: Thrift Savings	\$119,500.24		\$119,500.24	N.C. Gen. Stat. § 1C-1601(a)(9)	
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit		
	Thrift Savings Plan: Thrift Savings Plan	\$119,500.24		\$119,500.24	5 U.S.C. § 8346(a)	
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit		
	Nationwide Life Insurance policy - Whole life	\$993.50		\$993.50	N.C. Const. Art. X § 5; N.C. Gen. Stat. § 1C-1601(a)(6)	
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	of )	
	No	o yours after that for of	1000 11	ica on or anor the date or adjustine		
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No			•		
	□ Vec					

	D	ocument Pac	ie 19 of 70			
Fill in this information to identi	fy your case:					
Debtor 1 Jennifer Le	ao Pivior					
First Name	Middle Nam	e Last N	ame	-		
Debtor 2						
(Spouse if, filing) First Name	Middle Nam	e Last N	ame	_		
United States Bankruptcy Court f	or the: WESTERN DI	STRICT OF NORTH CA	AROLINA			
Cinica Giales Barniapis, Goali.				_		
Case number						
(if known)					if this is an	
				ameno	ded filing	
Official Form 106D						
_				_		
Schedule D: Credit	tors Who Have	e Claims Sec	ured by Proper	ty	12/15	
Be as complete and accurate as pos is needed, copy the Additional Page number (if known).						
1. Do any creditors have claims seci	ured by your property?					
☐ No. Check this box and su		rt with your other schedu	iles. You have nothing else	to report on this form		
_		t with your other sollow	alco. Tod have houning cloc	to report on this form.		
Yes. Fill in all of the inform	nation below.					
Part 1: List All Secured Clair	ms		0.1	0.1. 5	0.1.0	
2. List all secured claims. If a credite				Column B	Column C	
for each claim. If more than one cred much as possible, list the claims in all			2. As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion	
	· ·		value of collateral.	claim	if any	
2.1 Agricultural FCU Creditor's Name		erty that secures the clair	n: \$22,000.00	\$26,150.00	\$0.00	
Creditor's Name	1	equoia Ltd 4WD				
	80,000 miles	ed is the NADA clear	,			
	retail value.	d is the HADA cical	•			
PO Box 3419		file, the claim is: Check all	that			
Alexandria, VA 22302	apply.  ☐ Contingent					
Number, Street, City, State & Zip Co.	·					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Ch	eck all that apply.				
■ Debtor 1 only	☐ An agreement y	ou made (such as mortgag	e or secured			
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (s	uch as tax lien, mechanic's	lien)			
☐ At least one of the debtors and and			,			
☐ Check if this claim relates to a	Other (including	A1 -	Loan			
community debt						
Date debt was incurred	I ast 4 digit	s of account number	7550			
Wells Fargo Home						
Mortgage	Describe the prop	erty that secures the clair	n: \$517,469.62	\$550,000.00	\$0.00	
Creditor's Name		rel Rd. Marshall, NC				
	28753 Madiso	-				
		BR, 3.5 BA home wi	ith			
	barn on 12.5 a					
		with spouse. Value				
P.O. Box 14472		sult with realtor.	that			
Des Moines, IA	apply.	and the contract of the contract				
50306-0368	Contingent					
Number, Street, City, State & Zip Co.						
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Ch	ook all that apply				
Debtor 1 only	_					
Debtor 1 only  Debtor 2 only	An agreement y car loan)	ou made (such as mortgag	e or secured			
Debtor 1 and Debtor 2 only	,	uch as tax lien, mechanic's	lien)			
	(0		- ,			

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Debtor 1	Jennifer Lee Plyle	r		Case number (if know)
	First Name	Middle Name	Last Name	
_	one of the debtors and a	nother	en from a lawsuit	
	if this claim relates to a unity debt	Other (inclu	iding a right to offset)	DOT/ Mortgage
Date debt	was incurred	Last 4	digits of account nur	mber <u>4103</u>
Add the	dollar value of your entr	ies in Column A on this	page. Write that nu	mber here: \$539,469.62
If this is the last page of your form, add the dollar value totals from all pages Write that number here:				\$539,469.62

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 21 of	70		
Fill in this	information to identify your ca	ase:				
Debtor 1	Jennifer Lee Plyler	•				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	WESTERN DISTRICT OF NO	RTH CAROLINA			
Case numb	her					
(if known)					_	if this is an led filing
					amend	ed illing
Official	Form 106E/F					
	le E/F: Creditors Wi	no Have Unsecured	Claims			12/15
Schedule D: left. Attach to name and ca	Executory Contracts and Unexpir Creditors Who Have Claims Secu he Continuation Page to this page as enumber (if known).	red by Property. If more space is . . If you have no information to re	needed, copy the Par	t you need, fill it out,	number the entries i	n the boxes on the
	List All of Your PRIORITY Uns					
_ ′	creditors have priority unsecured	claims against you?				
	Go to Part 2.					
Yes.						
identify possible	of your priority unsecured claims. what type of claim it is. If a claim has a, list the claims in alphabetical order f more than one creditor holds a part	both priority and nonpriority amoun according to the creditor's name. If	its, list that claim here a you have more than tw	and show both priority a	ind nonpriority amoun	ts. As much as
	explanation of each type of claim, se	,				
(i oi aii	explanation of duolitype of claim, oc		s mondon bookion,	Total claim	Priority amount	Nonpriority amount
2.1 <b>IR</b>	<del>-</del>	Last 4 digits of accou	nt number	\$2,607.51	\$2,607.51	\$0.00
	ority Creditor's Name  O. Box 7346	When was the debt in	curred?			
	o. Box 7346 niladelphia, PA 19101-7346	Wileli was the dept in			-	
	mber Street City State Zlp Code	As of the date you file	e, the claim is: Check	all that apply		
Who i	ncurred the debt? Check one.	☐ Contingent				
■ De	btor 1 only	☐ Unliquidated				
☐ De	btor 2 only	☐ Disputed				
☐ De	btor 1 and Debtor 2 only	Type of PRIORITY uns	secured claim:			
☐ At	least one of the debtors and another	☐ Domestic support of	bligations			
☐ Ch	eck if this claim is for a communi	ty debt Taxes and certain o	other debts you owe the	government		
	claim subject to offset?	☐ Claims for death or	personal injury while yo	ou were intoxicated		
■ No		Other. Specify				
☐ Ye	S		)40/ Income )14			

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Debto	or 1 Jennifer Lee Plyler	Case number (if know)		
2.2	Madison County Tax Office Priority Creditor's Name	Last 4 digits of account number \$0.00	0 \$0.00	\$0.00
	P.O. Box 351	When was the debt incurred?		
	Marshall, NC 28753		_	
,	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	_	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
l	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
	■ No	Other. Specify		
	☐ Yes	Notice Purposes		
2.3	NC Department of Revenue	Last 4 digits of account number \$0.00	90.00	\$0.00
	Priority Creditor's Name P.O. Box 1168 Raleigh, NC 27602	When was the debt incurred?	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
١	Who incurred the debt? Check one.	☐ Contingent		
I	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
- 1	■ No	Other. Specify		
l	☐ Yes	Notice		
2.4	US Attorney	Last 4 digits of account number \$0.00	0 \$0.00	\$0.00
	Priority Creditor's Name 100 Otis Street Room 233	When was the debt incurred?	_	
	Asheville, NC 28801  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
,	Who incurred the debt? Check one.	☐ Contingent		
ĺ	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
		·· -		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul> <li>■ Taxes and certain other debts you owe the government</li> <li>□ Claims for death or personal injury while you were intoxicated</li> </ul>		
	No	_		
	□ Yes	☐ Other. Specify  Notice Purposes		
_		•		
Part 2				
	o any creditors have nonpriority unsecured clain			
	No. You have nothing to report in this part. Submit	this form to the court with your other schedules.		
	Yes.			

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.1 \$14,409.83 **Barclays Bank Delaware** Last 4 digits of account number Nonpriority Creditor's Name C/o Sessoms & Rogers When was the debt incurred? PO Box 110564 Durham, NC 27709 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No Lawsuit Other. Specify 16CVD147 ☐ Yes 4.2 **Barclays Bank Delaware** Last 4 digits of account number \$32,884.00 Nonpriority Creditor's Name PO Box 8803 When was the debt incurred? Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Consumer debt ☐ Yes 4.3 **Bull City Financial Solutions** Last 4 digits of account number **Various** \$64.00 Nonpriority Creditor's Name 2609 N. Duke St. Ste 500 When was the debt incurred? Durham, NC 27704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Medical collections - Hendersonville ☐ Yes Other. Specify Radiology and UNC Physicians

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.4 \$32,167.04 **Card Member Service** Last 4 digits of account number 8690 Nonpriority Creditor's Name **POB 15153** When was the debt incurred? Wilmington, DE 19886-5153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purposes ☐ Yes 4.5 **Card Services** Last 4 digits of account number 2507 \$13,755.06 Nonpriority Creditor's Name P.O. Box 13337 When was the debt incurred? Philadelphia, PA 19101-3337 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Consumer debt Other, Specify 4.6 **Cindy Cervantes** Last 4 digits of account number \$25,000.00 Nonpriority Creditor's Name 7120 SW 20th Street When was the debt incurred? Fort Lauderdale, FL 33317 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify personal loan ☐ Yes

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.7 \$4,889.00 Citi Last 4 digits of account number 3651 Nonpriority Creditor's Name PO Box 6034 When was the debt incurred? Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify consumer debt ☐ Yes 4.8 Citibank Last 4 digits of account number 6807 \$22,488.00 Nonpriority Creditor's Name PO Box 6241 When was the debt incurred? Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Consumer Debt** Other. Specify 4.9 **Consumer Credit Solutions** Last 4 digits of account number Unknown Nonpriority Creditor's Name MAC Q2132-0013 When was the debt incurred? POB 94423 **Albuquerque, NM 87199-9833** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify consumer debt ☐ Yes

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Jenniter Lee Plyler	Case number (if know)	
Credit One Bank	Last 4 digits of account number 4676	\$982.94
Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred?	
Las Vegas, NV 89193		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify consumer debt	
Elite Neurodiagnostics, LLC	Last 4 digits of account number	\$925.00
Nonpriority Creditor's Name		<u>-</u>
5825 Glenridge Dr.	When was the debt incurred?	
Building 3, Suite 101 Atlanta, GA 30328		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical debt	
		<b>\$0.00</b>
Equifax Credit Information Services  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
P.O. Box 105285 Atlanta, GA 30348	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Ves	Other Specify Notice Purposes	

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debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Consumer debt

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.1 Harris Regional Hospital \$4,909.66 Last 4 digits of account number 6 Nonpriority Creditor's Name Atten: Billing When was the debt incurred? 68 Hospital Drive Sylva, NC 28779 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical bills 4.1 **Howard Plyler** \$20,000.00 Last 4 digits of account number Nonpriority Creditor's Name 213 Devonwood Drive When was the debt incurred? Marion, NC 28752 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify personal loan ☐ Yes 4.1 M&T Bank \$960.00 8 Last 4 digits of account number Nonpriority Creditor's Name **POB 64679** When was the debt incurred? Baltimore, MD 21264-4679 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify bank fees

☐ Yes

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.1 Merrick Bank 2375 \$622.43 Last 4 digits of account number q Nonpriority Creditor's Name PO Box 171379 When was the debt incurred? Salt Lake City, UT 84117-1379 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Consumer debt Mission Hospitals - Bankruptcy **Various** 4.2 \$599.16 0 **Notice** Last 4 digits of account number **Accounts** Nonpriority Creditor's Name 509 Biltmore Avenue When was the debt incurred? Asheville, NC 28801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical bills 4.2 Paula Sorensen \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name 12635 Big Laurel Road When was the debt incurred? Marshall, NC 28753 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify personal loan ☐ Yes

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Debtor 1 Jennifer Lee Plyler Case number (if know) 4.2 **PMAB LLC** 2460 \$374.16 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 12150 When was the debt incurred? Charlotte, NC 28220 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical collections ☐ Yes 4.2 **Premier Card** 3543 \$1,006.06 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 5529 Sioux Falls, SD 57117-5529 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify consumer debt ☐ Yes 4.2 Shirley Lowder \$13,200,00 Last 4 digits of account number Nonpriority Creditor's Name 213 Devonwood Drive When was the debt incurred? Marion, NC 28752 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify personal loan

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Debt	or 1 Jennifer Lee Plyler	Case number (if know)	
4.2 5	TransUnion  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	P.O. Box 2000	When was the debt incurred?	
	Crum Lynne, PA 19022		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Notice Purposes	
4.2	US Bank	Last 4 digits of account number 3640	\$27,458.00
6	Nonpriority Creditor's Name		<del>+</del>
	P.O. Box 790408	When was the debt incurred?	
	Saint Louis, MO 63179-0408	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Purposes	
4.2	Wells Fargo	Last 4 digits of account number	\$6,215.00
	Nonpriority Creditor's Name		<b>40,</b> 210100
	PO Box 14517	When was the debt incurred?	
	Des Moines, IA 50306		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	<u>_</u>	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer debt	

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Case number (if know) Debtor 1 Jennifer Lee Plyler 4.2 Wells Fargo Bank \$15,914.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 301 S. Tryon Street When was the debt incurred? Charlotte, NC 28282 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify consumer loan ☐ Yes 4.2 Wells Fargo Card Services \$7,120.88 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 6412 When was the debt incurred? Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Judgment ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Brock & Scott, PLLC** Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1315 Westbrook Plaza Drive Part 2: Creditors with Nonpriority Unsecured Claims Winston Salem, NC 27103 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Encompass Healthcare Billing** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 280113 Part 2: Creditors with Nonpriority Unsecured Claims Denver, CO 80228-0113 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Financial Recovery Services** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 385908 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55438-5908 Last 4 digits of account number 0637 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address IRS Line **2.1** of (Check one):

Official Form 106 F/F

2303 W. Meadowview Road, Ste 200

Greensboro, NC 27407-3703

Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

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Case number (if know) Debtor 1 Jennifer Lee Plyler Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address NCB Management Services, Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1099 ■ Part 2: Creditors with Nonpriority Unsecured Claims Langhorne, PA 19047 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Portfolio Recovery Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 287 Independence ■ Part 2: Creditors with Nonpriority Unsecured Claims Virginia Beach, VA 23452 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sessoms & Rogers, P.A. Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 110564 ■ Part 2: Creditors with Nonpriority Unsecured Claims Durham, NC 27709 Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,607.51
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,607.51
				Total Claim
Total	6f.	Student loans	6f.	\$ 197,419.75
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 252,040.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 449,459.97

		DOCUME	III Paue 34 01 70	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jennifer Lee Plyl	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	PF NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>	0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	0.1.5		<u> </u>	2.1. 0000	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	- ity		Oldio		

		Document	Page 35 of	70	•	
Fill in this inf	ormation to identify your	case:				
Debtor 1	Jennifer Lee Plyle	er				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	Dealmorter Occurt for the	WESTERN DISTRICT OF N	IODTU CAROLINA			
United States	Bankruptcy Court for the:	WESTERN DISTRICT OF N	NORTH CAROLINA			
Case number						
(if known)					☐ Check if this	
					amended fili	ng
Official F	Form 106H					
Schedu	le H: Your Cod	ehtors				12/15
Jonicaa	ic III. I dai daa	CDIOIS				12/13
people are fili ill it out, and our name an	ng together, both are equa number the entries in the d case number (if known)	re also liable for any debts y ally responsible for supplyir boxes on the left. Attach the . Answer every question. you are filing a joint case, do r	ng correct informatio e Additional Page to	n. If more space is this page. On the to	needed, copy the Addit	ional Page,
	, oo	you are ming a joint case, as i	iot not officer opodoo d	o a codobioi.		
□ No						
Yes						
		lived in a community prope Nevada, New Mexico, Puerto				nclude
■ No. Go	to line 3.					
_		ıse, or legal equivalent live wit	th you at the time?			
in line 2 a	again as a codebtor only it D), Schedule E/F (Official	ors. Do not include your spo f that person is a guarantor Form 106E/F), or Schedule	or cosigner. Make su	ire you have listed	the creditor on Schedul	e D (Official
	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The concept Check all schedu	reditor to whom you ow les that apply:	e the debt
Sar	ula L. Sorenson ne as Debtor ouse			■ Schedule D, □ Schedule E/I □ Schedule G Wells Fargo H	F, line	

Schedule H: Your Codebtors

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Fill	in this information to identify your c	ase:									
Del	otor 1 Jennifer Lee	e Plyler				_					
	otor 2 puse, if filing)					_					
Uni	ted States Bankruptcy Court for the	E WESTERN DISTRIC	T OF NOF	RTH CAROLIN	A	_					
	se number nown)		-						ed filing ent showi	ng postpetition ch	napter
0	fficial Form 106I						Ī	/M / DD/ Y	YYY	Ü	
S	chedule I: Your Inc	ome						, 22, .			12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	ır spouse is not filing w	ith you, d	o not include	inforn	natio	on abou	t your spo	ouse. If n	nore space is ne	eded,
1.	Fill in your employment information.		Debtor	·1				Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	■ Emp	■ Employed				■ Employed			
	attach a separate page with information about additional	Employment status	☐ Not	employed				☐ Not e	mployed		
	employers.	Occupation	Progr	am Manager	•			Clinica	Social	Worker	
	Include part-time, seasonal, or self-employed work.	Employer's name	USDA			VA Medical Center					
	Occupation may include student or homemaker, if it applies.	Employer's address		ox 60000 Orleans, LA	70160	)		Mounta	in Hom	e, TN 37684	
		How long employed t	here?	15 years							_
Pai	rt 2: Give Details About Mo	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have	nothing to repo	ort for a	any l	ine, write	e \$0 in the	space. Ir	nclude your non-f	iling
	u or your non-filing spouse have meespace, attach a separate sheet to		ombine th	e information fo	or all e	mplo	oyers for	that perso	on the	lines below. If yo	u need
							For De	btor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	8	3,005.88	\$	6,434.86	
3	Estimate and list monthly overt	ime nav			3	<b>+</b> \$		0.00	<b>±</b> \$	0.00	

8,005.88

6,434.86

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Jennifer Lee Plyler	-	C	Case r	number (if known)	_		
					For	Debtor 1		For Debtor 2 or	
	Cor	y line 4 here	4.		\$	8,005.88		non-filing spouse \$ 6,434.86	
					· —				_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	58		\$	2,315.68		\$ <u>1,150.36</u>	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b 5c		\$	0.00		\$51.15 \$541.67	_
	5d.	Required repayments of retirement fund loans	50		\$ 	246.92 0.00		\$541.67 \$0.00	_
	5e.	Insurance	5e		\$	590.83		\$ 563.65	
	5f.	Domestic support obligations	5f		\$	0.00	5	\$ 0.00	_
	5g.	Union dues	50		\$	0.00		\$ 0.00	_
	5h.	Other deductions. Specify: TSP loan repayment	5h	า.+	\$	715.50			_
		Life insurance	_		\$	0.00	,	\$ 25.68	<del>}</del>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	3,868.93	9	\$ 2,332.51	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,136.95	,	\$ 4,102.35	<u>5</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00	:	\$ 0.00	
	8b.	Interest and dividends	8b		\$	0.00		\$ 0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C.	\$	0.00	;	\$ 0.00	_
	8d.	Unemployment compensation	80		\$	0.00		\$ 0.00	_
	8e.	Social Security	86	€.	\$	0.00	Ç	\$ 0.00	<u></u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f	:	\$	0.00	;	\$ 0.00	-
	8g.	Pension or retirement income	8g	g.	\$	0.00		\$ 0.00	
	8h.	Other monthly income. Specify:	_ 8h	า.+	\$	0.00	+ 5	\$0.00	<u>)                                    </u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0.00		\$	0
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		1,136.95 + \$		4,102.35 = \$	8,239.30
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,130.33		4,102.33 - V	0,200.00
11.	State Included Other	te all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your per friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		•	•	•		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							8,239.30 ned
10	De :	you expect an increase or decrease within the year often you file this farm	2					month	ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.  Yes. Explain: Debtor is disabled and has been out on sick leav		vr o	cian	vificant time	205	iod Sho is not !!	koly to
		Depici is disabled and has been out on sick leav	C 10	,, a	Sign	micani illile þ	7611	iou. One is not ii	nery to

Official Form 106I Schedule I: Your Income page 2

return to work.

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Filli	in this information to identify your case:				
			Ohaa	al was to to	
Debt	Jennifer Lee Plyler			ck if this is:  An amended filing	
Debt (Spo	tor 2			•	ving postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the: WESTERN DISTRICT OF NOR	RTH CAROLINA	-	MM / DD / YYYY	
	e numbernown)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the nber (if known). Answer every question.				
Part					
1.	Is this a joint case?  No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					□ No □ Yes
					□ No
					☐ Yes
					□ No
				_	☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Part	t 2: Estimate Your Ongoing Monthly Expenses				
Esti exp	imate your expenses as of your bankruptcy filing date unles enses as of a date after the bankruptcy is filed. If this is a su licable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule icial Form 106l.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		3,881.20
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	i	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		17.00
5.	<ol> <li>Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as</li> </ol>	home equity loans	4d. \$ 5. \$		0.00

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Deptor 1	Jennifer Lee Plyler	Case num	ber (if known)	
S. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	273.38
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	441.00
6d.	Other. Specify: Cleaning	6d.	\$	240.00
Food	and housekeeping supplies		\$	500.00
Child	care and children's education costs	8.	\$	0.00
Cloth	ing, laundry, and dry cleaning	9.	\$	100.00
	onal care products and services	10.	\$	100.00
. Medic	cal and dental expenses	11.	\$	665.00
. Trans	sportation. Include gas, maintenance, bus or train fare.		_	005.00
	t include car payments.	12.	·	225.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	75.00
	table contributions and religious donations	14.	\$	0.00
i. Insur				
	t include insurance deducted from your pay or included in lines 4 or 20.  Life insurance	15a.	\$	695.53
	Health insurance	15a. 15b.		161.00
	Vehicle insurance	15b.	·	133.00
	Other insurance. Specify: Marine Insurance	15d.		48.00
ı ou.	Malpractice Insurance		\$	33.00
Tavos	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	აა.00
Speci		16.	\$	0.00
•	Iment or lease payments:		·	
17a.	Car payments for Vehicle 1	17a.	\$	776.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: Student Loans	17c.	\$	1,200.00
17d.	Other. Specify: Non-filing spouse's vehicle payment	17d.	\$	344.42
	Non-filing spouse's cc debt service		\$	500.00
	payments of alimony, maintenance, and support that you did not report as			0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	payments you make to support others who do not live with you.		\$	0.00
Speci	,	19.		
	real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses	20c. 20d.		0.00
	Homeowner's association or condominium dues	20a. 20e.		0.00
		20e. 21.	*	0.00
	: Specify: Pets			240.00
Drive	er - the debtor cannot drive because of her health		+\$	1,300.00
	late your monthly expenses			
	Add lines 4 through 21.		\$	11,948.53
22b. (	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	Add line 22a and 22b. The result is your monthly expenses.		\$	11,948.53
				<u> </u>
	Ilate your monthly net income.  Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,239.30
	Copy your monthly expenses from line 22c above.	23a. 23b.		8,239.30 11,948.53
۷۵۵.	oopy your monuny expenses nomine 220 above.	ZJU.	Ψ	11,940.03
23c.	Subtract your monthly expenses from your monthly income.			_
_00.	The result is your <i>monthly net income</i> .	23c.	\$	-3,709.23
	ou expect an increase or decrease in your expenses within the year after your earless within the year after your earless within the year or do you expect your			roaco or docrocos bossuss s
	ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?	i mongage	payment to incr	ease of decrease decause of
■ No				
	E LEAUIGH HELE.			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Jennifer Lee Plyle	er			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF NORTH CAROLINA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
		ın Individual	Dobtor's S	chodulos	
Declara	lion About a	ili iliuiviuuai	Deniol 2 3	<u>criedules</u>	12/15
obtaining mone years, or both. 1	y or property by fraud ir I8 U.S.C. §§ 152, 1341, 1	n connection with a banl			nent, concealing property, or I, or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	t bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice,
				Declaration, a	and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules fi	iled with this declaration	n and
X /s/ Jer	nnifer Lee Plyler		Х		
	er Lee Plyler		Signature of	of Debtor 2	
	ire of Debtor 1		-		

Date

Date September 8, 2017

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	to this to form					
_		nation to identify you				
De	btor 1	Jennifer Lee Ply First Name	Middle Name	Last Name		
	btor 2					
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	kruptcy Court for the:	WESTERN DISTRICT O	F NORTH CAROLINA		
	se number nown)				_	Check if this is an Imended filing
	ficial For		Affairs for Indivi	duals Filing for B	ankruptcy	4/16
info nun	ormation. If months	ore space is needed, ). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	is?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
<b>3.</b> stat					ity property state or territor ico, Texas, Washington and V	
	■ No					
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 **Jennifer Lee Plyler** 

				Dahtar 1		Dahtan 2		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December	31, 2016 )	■ Wages, commissions, bonuses, tips			nmissions,	
				☐ Operating a business		☐ Operating a	business	
	15 YTD: De come	ebtor Emplo	yment	■ Wages, commissions, bonuses, tips	\$113,616.14	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include in and other winnings.  List each	come regard public bene If you are fil	dless of whet fit payments; ing a joint ca the gross inc	he during this year or the two her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a test; dividends; money collector you received together, list it	alimony; child suppoted from lawsuits; only once under Do	royalties; and ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	ı Made Before You Filed for I	Bankruptcy			
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor l	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	imer debts. Consumer debi	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		□ No.	90 days bef Go to line	ore you filed for bankruptcy, did 7.	d you pay any creditor a tota	al of \$6,425* or mo	re?	
		☐ Yes  * Subject	paid that c not include	each creditor to whom you pair reditor. Do not include paymen payments to an attorney for that on 4/01/19 and every 3 years	nts for domestic support obliquis bankruptcy case.	gations, such as ch	nild support a	nd alimony. Also, do
	■ Yes.			or both have primarily consu ore you filed for bankruptcy, di		al of \$600 or more?	?	
		□ No.	Go to line	7				
		■ Yes	List below include pay	each creditor to whom you pai yments for domestic support ol r this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for
	Secure	d creditors	3	Usual paymen past 3 months	nts- \$0.00	\$0.00	☐ Mortgag ☐ Car ☐ Credit 0 ☐ Loan R	Card

☐ Suppliers or vendors

☐ Other\_\_

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Debtor 1	Jennifer Lee Plyler		Cas	e number (if known)		
<i>Insid</i> of ware a bu	nin 1 year before you filed for bankrupt ders include your relatives; any general pa hich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony.	artners; relatives of any gene a control, or owner of 20% or	eral partners; partner more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	l partner; corporations gent, including one for
	No					
	Yes. List all payments to an insider.					
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
insi	nin 1 year before you filed for bankrupt der? ude payments on debts guaranteed or cos		ments or transfer a	iny property on a	ccount of a de	bt that benefited an
	No					
	Yes. List all payments to an insider					
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	this payment tor's name
Part 4:	Identify Legal Actions, Repossession	ns. and Foreclosures				
List	nin 1 year before you filed for bankrupt all such matters, including personal injury ifications, and contract disputes.					
	No Yes. Fill in the details.					
	se title se number	Nature of the case	Court or agency		Status of the case	
& S 150	ells Fargo Bank, N.A. C/o Brock Scott, PLLC, vs. Jennifer Plyler CVD308 CVD308	Civil	Madison County District Court		☐ Pending ☐ On appea ☐ Conclude	
Ва	rclays Bank Delaware C/o	Civil	Madison Count	ty District	☐ Pending	
	ssoms & Rogers vs. Jennifer L.		Court		☐ On appea	al
Ply 160	ver CVD147		2 N Main St. Marshall, NC 28	8753	Conclude	ed
Ро	rtfolio Recovery Services vs.	Civil	Madison Count	ty Court	■ Pending	
	nnifer Plyler		2 N Main St.		☐ On appea	al
170	CVD259		Marshall, NC 28	8753	☐ Conclude	
	nin 1 year before you filed for bankrupt ck all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.					
Cre	editor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
	nin 90 days before you filed for bankru ounts or refuse to make a payment bec		uding a bank or fir	nancial institutior	n, set off any a	mounts from your
	No					

Describe the action the creditor took

Amount

Yes. Fill in the details.Creditor Name and Address

Date action was

taken

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Case 17-10390

Doc 1

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Debtor 1 Jennifer Lee Plyler

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any transferred	property	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin Include both outright transfers and transfers made a include gifts and transfers that you have already lis  No  Yes. Fill in the details.	ness or financial affairs? as security (such as the granting						
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	pa	escribe any property or ayments received or debts aid in exchange	Date transfer was made			
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		to a self-s	ettled trust or similar device o	of which you are a			
	Name of trust	Description and value of the	property t	ransferred	Date Transfer was made			
Par	8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, an	d Storage	Units				
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or ot houses, pension funds, cooperatives, associati  No Yes. Fill in the details.	her financial accounts; certific	ates of de					
		st 4 digits of Type of a count number instrume	ccount or nt	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?  No	before you filed for bankrupto	y, any safe	e deposit box or other deposi	tory for securities,			
	<ul> <li>✓ Yes. Fill in the details.</li> <li>Name of Financial Institution</li> <li>Address (Number, Street, City, State and ZIP Code)</li> </ul>	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Desc	ribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or pl  No Yes. Fill in the details.	ace other than your home with	in 1 year b	pefore you filed for bankrupto	y?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Desc	ribe the contents	Do you still have it?			

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23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

Debtor 1 Jennifer Lee Plyler

Part 9:	Identify	<b>Property</b>	You	Hold	or	Control	for	Someone	Else
---------	----------	-----------------	-----	------	----	---------	-----	---------	------

	for someone.			
	□ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Shirley Plyler 213 Devonwood Dr. Marshall, NC 28753	12635 Big Laurel Rd. Marshall, NC 28753	Baby jars and a bag containing old money. These items are being held in the debtor's safe.	Unknown
	Howard Plyler 213 Devonwood Dr. Marshall, NC 28753	12635 Big Laurel Rd. Marshall, NC 28753	The debtor's fathers guns, including (1) 32 Kaltec, (1) 9mm, and (2) 380 Bersa.	\$2,700.00
	rt 10: Give Details About Environmental Inform			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, groun		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rej	port all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No			
	☐ Yes. Fill in the details.			

	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	lave you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

■ No □ Yes. Fill in the details.			
Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

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Page 47 of 70 Case number (if known) Document Debtor 1 **Jennifer Lee Plyler** 

Pai	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any of	the following connections to any business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		☐ A member of a limited liability comp	any (LLC) or limited liability partnership (L	LP)				
		☐ A partner in a partnership						
		☐ An officer, director, or managing exc	ecutive of a corporation					
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
		No. None of the above applies. Go to P	Part 12.					
		Yes. Check all that apply above and fill						
		siness Name	Describe the nature of the business	Employer Identification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
	•	,,,,,,,	name of accountant of bookkeeper	Dates business existed				
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial				
		No Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
Pai	t 12:	Sign Below						
are with 18 U	true a ba J.S.C	and correct. I understand that making a		leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.				
Je	nnife	er Lee Plyler are of Debtor 1	Signature of Debtor 2					
Dat	e _	September 8, 2017	Date					
Did ■ N	lo	attach additional pages to Your Stateme	nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?				
	lo	. , ,	an attorney to help you fill out bankruptcy					

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Fill in this inforn	nation to identify your	case:				
Debtor 1	Jennifer Lee Plyle	Middle Name		Last Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bar	nkruptcy Court for the:	WESTERN DISTI	RICT OF NO	RTH CAROLINA		
Case number						☐ Check if this is an amended filing
Official Fo		n for Indiv	/iduals	Filing Under C	Chapter	7 12/15
If you are an indi creditors have you have lease You must file this whiche on the f	vidual filing under chap e claims secured by you ed personal property a s form with the court w ver is earlier, unless the form	oter 7, you must fil ur property, or nd the lease has n ithin 30 days after e court extends th	Il out this for not expired. you file your e time for ca	m if: · bankruptcy petition or by use. You must also send co	the date set fo	
Part 1: List Yo	our name and case num our Creditors Who Have	nber (if known).				top of any additional pages,
information be Identify the cre	low. editor and the property th	nat is collateral	What do y secures a	ou intend to do with the prodebt?	operty that	Did you claim the property as exempt on Schedule C?
	gricultural FCU			der the property.		□ No
name:  Description of property securing debt:	2011 Toyota Seque 80,000 miles The value listed is clean retail value.		■ Retain t Reaffir	the property and redeem it. the property and enter into a mation Agreement. the property and [explain]:		■ Yes
Creditor's <b>W</b> name:	/ells Fargo Home Mo	rtgage	☐ Retain	der the property. the property and redeem it.		□ No
Description of property securing debt:	12635 Big Laurel R NC 28753 Madison Residence: 4 BR, with barn on 12.5 a Owned jointly with	n County 3.5 BA home acres	Reaffir  Retain	the property and enter into a mation Agreement. the property and [explain]:		■ Yes
	Value based on co realtor.			will retain property and or regular monthly paymen		

Part 2: List Your Unexpired Personal Property Leases
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended.

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Debtor 1 <b>J</b>	ennifer Lee Plyler	Case numbe	「 (if known)
You may ass	ume an unexpired personal property lea	ase if the trustee does not assume it. 11 U.S.C. §	365(p)(2).
Describe yo	ur unexpired personal property leases		Will the lease be assumed?
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Property:	i loadoù		☐ Yes
Lessor's nan			□ No
Property:	on leased		☐ Yes
Lessor's nan			□ No
Description of Property:	or leased		☐ Yes
Lessor's nan			□ No
Property:	or reased		☐ Yes
Lessor's nan			□ No
Property:	or reased		☐ Yes
Lessor's nan			□ No
Description of Property:	or leased		☐ Yes
Part 3: Signature	gn Below		
Under penali	ty of perjury, I declare that I have indicat t is subject to an unexpired lease.	ted my intention about any property of my estate	e that secures a debt and any personal
	nifer Lee Plyler	X	
	er Lee Plyler re of Debtor 1	Signature of Debtor 2	
Date	September 8, 2017	Date	

Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the:  Case number (if known)  Western District of North Carolina  Western District of North Carolina  Western District of North Carolina  Official Form 122A - 1  122A-1Supp:  1 1. There is no presumption of abuse  2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test  Calculation (Official Form 122A-2).  3. The Means Test does not apply now because of qualified military service but it could apply later.  Check if this is an amended filing	Fill in this inf	formation to identify your case:		QI.			'ann at and	in this faces and	i. Fam.
Debtor 2   Cooker   Illing						niy as d	rectea	in this form and	I In Form
United States Bankruptcy Court for the: Western District of North Carolina  2. The calculation to determine if a presumption of abuse applies will be made under Chapter Theans Test Calculation (Official Form 122A-7).  3. The Means Test does not apply now because of qualified military service but it could apply later.  Chapter 7 Statement of Your Current Monthly Income  12/1  Be as complete and accurate a possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, its tests a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and an number (if known), if you believe that you are oxempted from a presumption of abuse because you do not have primarily consumer debts or because and in Statement of Exemption from Presumption of Abuse Under § 727(b)(2) (Official Form 122A-1Supp) with the form.  2011:15  Calculate Your Current Monthly Income  1. What is your marital and filling status? Check one only.  What is your marital and filling status? Check one only.  Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11.  Married and your spouse is in NOT filling with you. You and your spouse are:  If Living in the same household and are not legally separated. Fill out Column A, lines 2-11.  Living apart for reasons that do not include evading the Means Test requirements. 11 U. S.C. § 707(b)(78).  Fill in the average monthly income that you crevised from all sources, derived during the fell months and divide the total by 6. Fill he result. Do not fill under any income your another your and your spouse are legally separated. Fill out Column B, by checking this box, you declare under living apart for reasons that do not include evading the Means Test requirements. 11 U. S.C. § 707(b)(78).  Fill in the average monthly income that you are your apparent and reasonable requirements and the species of that you and your spouse are legally		Jenniter Lee Plyler							
United States Bankruptcy Court for the: Western District of North Carolina  Case number  (I known)  2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means 7 test Calculation (Official Form 122A-2).  3. The Means Test does not apply now because of qualified military service but it could apply later.  Check if this is an amended filing  Official Form 122A - 1  Chapter 7 Statement of Your Current Monthly Income  12/1  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, tatch a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and unalitying military service, complete and filis Statement of Exemption from Presumption of Abuse Under § 707(b/g2) (Official Form 122A-1Supp) with this form.  DOTE:  Calculate Your Current Monthly Income  1. What is your marital and filing status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married and your spouse is NOT filing with you. Votu and your spouse are:  Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.  Living separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Living separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Columns A and B, lines 2-11.  Chiving separately or are legally separated. Fill out both Col				'	1. There is	no presi	umptior	n of abuse	
Case number (#Incom)    Check if this is an amended filing			North Carolina		2. The calcu	ulation t	o deteri	mine if a presur	nption of abuse
Official Form 122A - 1  Chapter 7 Statement of Your Current Monthly Income  12/1  Bas as complete and accurred as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, that that a separate sheet to his form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of underlying military service, complete and tile Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.  Part 1:  Calculate Your Current Monthly Income  1. What is your martial and filling status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11.  Living in the same household and are not legally separated. Fill out Column A lines 2-11.  Living separately or are legally separated. Fill out Column A, lines 2-11.  Living separately or are legally separated. Fill out Column A lines 2-11.  Separated and your spouse is NOT filling with you. You and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated. Fill out Column A lines 2-11.  Separated and your spouse is not a spouse of the long of the second shall be a spouse of the long of the second shall be a spouse of the long of the second shall be a spouse of the long of	Office Otato	Vestern Bistrict of	TTOTAL CALONINA	_					Means Test
Official Form 122A - 1  Chapter 7 Statement of Your Current Monthly Income  12/1  2a as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, statch a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and asse number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily ensured the page of		er		— I I ,		•		,	
Chapter 7 Statement of Your Current Monthly Income  12/11  Bas acomplete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, its accomplete and accurate as possible, it wo married people are filling together, both are equally responsible for being accurate. If more space is needed, its accomplete and accurate and file Statement of Exemption for the additional information applies. Were your name and asse number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of usualitying milliters service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b/X) (Official Form 122A-1Supp) with this form.  Part 11  Calculate Your Current Monthly Income  1. What is your marital and filling status? Check one only.  Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11.  Married and your spouse is filling with you. You and your spouse are:  Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.  Living separately or are legally separated. Fill out Column A, lines 2-11; don to fill out Column B. By checking this box, you declare under penalty of perity that you and your spouse are legally separated under nonbarkupte law that applies or that you and your spouse are legally separated. Fill out Column B. By checking this box, you declare under penalty of perity that you and your spouse are legally separated under nonbarkupte law that applies or that you and your spouse are legally separated. Fill out Dollumn B. By checking this box, you declare under living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(E).  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you fills this bankruptey case. 11 U.S.C § 101(ftQA). For example, if you are filling o	,							117	
The part of the property of th					☐ Check if the	nis is a	n ame	nded filing	
The part of the property of th	Official	Form 122A - 1						J	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, natach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and ace number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.    Calculate Your Current Monthly Income		_	rent Moi	nthly Inc	ome				12/1
101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all of wide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.    Column A Debtor 1	attach a separcase number (qualifying mili  Part 1:  1. What is  Not  Mar  Mar  L	rate sheet to this form. Include the line number to w (if known). If you believe that you are exempted fror (itary service, complete and file Statement of Exemp Calculate Your Current Monthly Income s your marital and filing status? Check one on married. Fill out Column A, lines 2-11.  ried and your spouse is filing with you. Fill ou ried and your spouse is NOT filing with you. V iving in the same household and are not lega iving separately or are legally separated. Fill of penalty of perjury that you and your spouse are leving apart for reasons that do not include evading	t both Columns fou and your s ly separated. but Column A, li gally separatec g the Means Te	and information a of abuse becau inption of Abuse in A and B, lines appouse are: Fill out both Conness 2-11; do not dunder nonbanest requirements	ppplies. On the se you do not h Under § 707(b)  2-11.  Jumns A and B ot fill out Columkruptcy law this. 11 U.S.C § 7	top of ar ave prin (2) (Office ), lines 2 n B. By at applie (07(b)(7	2-11. checkies or the (/)(B).	ional pages, writonsumer debts on 122A-1Supp) with the second sec	e your name and r because of vith this form.
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm  Debtor 1  Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$  Debtor 1  Gross receipts (before all deductions) Solution  Debtor 1	101(10A). If the 6 month	For example, if you are filing on September 15, the 6-modes, add the income for all 6 months and divide the total	onth period would by 6. Fill in the re	be March 1 throus bult. Do not include	ugh August 31. If de any income ar	the amo	ount of your	our monthly incom once. For examp	ne varied during le, if both
payroll deductions).  3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm  Debtor 1  Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$  Debtor 1  Gross receipts (before all deductions) Solution  Debtor 1							Debt	or 2 or	
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm \$  Debtor 1  Gross receipts (before all deductions)  Solution  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Solution  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Solution  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Solution  Debtor 1  Debtor 1  Debtor 1	_		and commission	ons (before all	\$ 8,00	5.88	\$	6,434.86	
of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm \$  Debtor 1  Gross receipts (before all deductions)  Net income from rental and other real property  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Solution  Octopy here -> \$  O.00  Solution  Octopy here -> \$  O.00  Octopy here -> \$  O.00  Octopy here -> \$  O.00  Octopy here -> \$	3. Alimon	ny and maintenance payments. Do not include	payments from	a spouse if	\$	0.00	\$	0.00	
Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses -\$ 0.00 Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00  6. Net income from rental and other real property  Debtor 1  Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses -\$ 0.00	of you from ar and roo	or your dependents, including child support.  n unmarried partner, members of your household partners. Include regular contributions from a sp	Include regular , your depende	r contributions nts, parents,	\$	0.00	\$	0.00	
Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm \$  O.00  Copy here -> \$  0.00  Copy here -> \$  0.00  6. Net income from rental and other real property  Debtor 1  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Solution    O.00	5. Net inc	come from operating a business, profession,		44					
Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm \$  O.00  Copy here -> \$  0.00  Co	•			otor 1					
Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00  6. Net income from rental and other real property  Debtor 1  Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00		, ,	·						
6. Net income from rental and other real property  Debtor 1  Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00				Conv here ->	¢	0 00	\$	0.00	
Gross receipts (before all deductions)  Ordinary and necessary operating expenses  September 1  0.00  0.00  0.00  0.00		71	n \$	John Heie ->	Ψ		Ψ	0.00	
Gross receipts (before all deductions)  Ordinary and necessary operating expenses  \$\begin{array}{c} 0.00 \\ 0	6. Net inc	come from rental and other real property	Deh	otor 1					
Ordinary and necessary operating expenses -\$ 0.00	Cross	raccipts (hafara all daductions)							
Ordinary and necessary operating expenses		. ,	·						
				Copy here ->	\$	0.00	\$	0.00	

0.00

7. Interest, dividends, and royalties

0.00

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Debtor 1 Jennifer Lee Plyler Page 51 01 70

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here:	nt received was a bene	fit under				
		<b>0.</b>	00				
	For you S For your spouse S	0.	00				
9.	<b>Pension or retirement income.</b> Do not include any arbenefit under the Social Security Act.	mount received that wa	is a	\$	0.00	\$	0.00
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymer manity, or internationa a separate page and p	nts I or	\$	0.00	\$ \$	0.00
	Total amounts from separate pages, if any.			Φ	0.00	· .	0.00
	rotal amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	8,005.88	+	6,434.86	\$14,440.74
Part	2: Determine Whether the Means Test Applies	to You					Total current monthly income
12.	Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	nere=>	\$ <u>14,440.74</u>
	Multiply by 12 (the number of months in a year)						<b>x</b> 12
	12b. The result is your annual income for this part of the	e form				12b.	173,288.88
13.	Calculate the median family income that applies to	you. Follow these step	os:				
	Fill in the state in which you live.	NC					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the banl	online using the link s		in the separa		13. tions	\$55,722.00
14.	How do the lines compare?						
	14a.    Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, ch	neck box	1, There is n	o presum	ption of abus	e.
	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined by	/ Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information o	n this sta	atement and i	n any atta	achments is tr	ue and correct.
	X /s/ Jennifer Lee Plyler						
	Jennifer Lee Plyler Signature of Debtor 1						
	Date September 8, 2017 MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file For	m 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.					

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Fill in this information to identify your case:	Chec
Debtor 1 Jennifer Lee Plyler	lines
Debtor 2	Sta
(Spouse, if filing)	
United States Bankruptcy Court for the: Western District of North Ca	arolina 🔠
Case number	
(if known)	
	Псь

	the appropriate box as directed in 0 or 42:
	ording to the calculations required by this ement:
■ 1	There is no presumption of abuse

- 1. There is no presumption of abuse
- □ 2. There is a presumption of abuse.
- ☐ Check if this is an amended filing

### Official Form 122A - 2

### **Chapter 7 Means Test Calculation**

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Copy your total current monthly income. Copy line 11 f	rom Offi	cial Form 122	\-1 here=>	\$ 14,440.74
Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.				
■ Yes. Is your spouse Filing with you?				
■ No. Go to line 3.				
☐ Yes. Fill in \$0 for the total on line 3.				
Adjust your current monthly income by subtracting any part of your sp household expenses of you or your dependents. Follow these steps:  On line 11, Column B of Form 122A–1, was any amount of the income you r expenses of you or your dependents?				nousehold
□ No. Fill in 0 for the total on line 3.				
Yes. Fill in the information below:				
State each purpose for which the income was used  For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are	in the amount subtracting four subtracting four spouse's inc	rom	
Non-filing spouse's vehicle payment	\$	344.32		
Non-filing spouse's debt service	\$	1,100.00		
		900.00		
Non-filing spouse's retirement	\$			
Non-filing spouse's retirement  Non-filing spouse's insurance	\$ + \$	316.89		
	·	316.89 2,661.21	Copy total here	2.661.21

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Jennifer Lee Plyler Debtor 1 Case number (if known)

#### Part 2:

#### Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

**National Standards** 

You must use the IRS National Standards to answer the guestions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,132.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

2

98.00

7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.

Copy here=> \$ 98.00

#### People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person 117

7e. Number of people who are 65 or older 0

7f. **Subtotal.** Multiply line 7d by line 7e. 0.00 0.00 Copy here=>

7g. Total. Add line 7c and line 7f 98.00

Copy total here=>

98.00

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Debtor 1 Jennifer Lee Plyler

Case number (if known)

Loc	al Sta	andards You must use the IRS Local Standards to an	nswer the q	uestions in lin	es 8-15.					
		n information from the IRS, the U.S. Trustee Prograntcy purposes into two parts:	m has divid	ded the IRS L	ocal Stand	ard for	housin	g for		
_		ing and utilities - Insurance and operating expenses ing and utilities - Mortgage or rent expenses	5							
To a	answ	er the questions in lines 8-9, use the U.S. Trustee P	rogram ch	art.						
		ne chart, go online using the link specified in the separat t may also be available at the bankruptcy clerk's office.	te instructio	ons for this for	m.					
8.		ising and utilities - Insurance and operating expensive dollar amount listed for your county for insurance and						5, fill \$		509.00
9.	Hou	sing and utilities - Mortgage or rent expenses:								
	9a.	Using the number of people you entered in line 5, fill ir listed for your county for mortgage or rent expenses				\$		908.00		
	9b.	Total average monthly payment for all mortgages and	other debts	s secured by y	our home.					
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.									
		Name of the creditor	Average paymer	e monthly nt						
		Wells Fargo Home Mortgage	\$	3,881.20						
									Dancat this	
		Total average monthly payment	\$	3,881.20	Copy here=>	-\$	3	,881.20	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.								
		Subtract line 9b (total average monthly payment) from or rent expense). If this amount is less than \$0, enter \$			\$		0.00	Copy here=>	\$	0.00
10.		ou claim that the U.S. Trustee Program's division of cts the calculation of your monthly expenses, fill in				g is inc	orrect	and	\$	0.00
	Ex	plain why:								
11.	Loc	al transportation expenses: Check the number of veh	nicles for wh	nich you claim	an ownersh	nip or op	erating	expense		
		). Go to line 14.								
	□ 1	. Go to line 12.								
	<b>2</b>	2 or more. Go to line 12.								
12.		icle operation expense: Using the IRS Local Standard rating expenses, fill in the Operating Costs that apply fo							\$	430.00

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	Documer	nt Pag	e 55 of	70			
Debtor 1	Jennifer Lee Plyler			Case number	(if known)		
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.						
Ve	hicle 1 Describe Vehicle 1: 2011 Toyota Sequoia L the NADA clean retail v		000 miles	The valu	e listed is		
13a	. Ownership or leasing costs using IRS Local Standard			\$	485.00		
13b	. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.			t			
	Name of each creditor for Vehicle 1	Average m payment	onthly				
	Agricultural FCU	\$	390.35				
	Total Average Monthly Payment	\$	390.35	Copy here =>	-\$ <b>390</b> .	Repeat this amount on line 33b.	
	Net Vehicle 1 ownership or lease expense  Subtract line 13b from line 13a. if this amount is less than \$0,  hicle 2 Describe Vehicle 2:			\$	94.65	Copy net Vehicle 1 expense here => \$	94.65
134	Non-filling spouse's vel  Ownership or leasing costs using IRS Local Standard			\$	0.00		
	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.				0.00		
	Name of each creditor for Vehicle 2	Average m payment	onthly				
	-NONE-	\$					
	Total Average Monthly Payment	\$	0.00	Copy here => -\$ _	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0,	, enter \$0		\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Transportation expense allowance regardless of whether you				ards, fill in the <i>P</i>	Public \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in word claim more than the IRS Local Standard for <i>Public Transportation</i> .	hat you belie					0.00

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Debtor 1 **Jennifer Lee Plyler** Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soci your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes.		2 422 24
	Do not include real estate, s	sales, or use taxes.	\$	3,466.04
17.	<b>Involuntary deductions:</b> T contributions, union dues, a	he total monthly payroll deductions that your job requires, such as retirement nd uniform costs.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	439.00
18.	filing together, include paym	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life ints, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	206.03
19.		The total monthly amount that you pay as required by the order of a court or a spousal or child support payments.		
	Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required: b, or		
		ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	r any elementary or secondary school education.	\$	0.00
22.	that is required for the healt	benses, excluding insurance costs: The monthly amount that you pay for health care h and welfare of you or your dependents and that is not reimbursed by insurance or paid to Include only the amount that is more than the total entered in line 7.		
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	652.00
23.	for you and your dependent	<b>lephone services:</b> The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
	. ,	r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	441.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	7,467.72

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Debtor 1 Jennifer Lee Plyler Case number (if known)

Add	itional Expense Deductions These are additional	al deductions allo	owed by the	e Means Test.		
	Note: Do not include	e any expense a	allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health insurance, disability insurance, and health savings ac your dependents.				r	
	Health insurance	\$2	02.14			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00			
	Total	\$	202.14	Copy total here=>	\$	202.14
	Do you actually spend this total amount?					
	<ul><li>□ No. How much do you actually spend?</li><li>■ Yes</li></ul>	\$				
26.	Continued contributions to the care of household continue to pay for the reasonable and necessary car your household or member of your immediate family include contributions to an account of a qualified ABL	I or family mem re and support of who is unable to	of an elderly o pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably safety of you and your family under the Family Violence.					
	By law, the court must keep the nature of these exper	nses confidentia	al.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy line 8.	costs are includ	ed in your	insurance and operating expenses on		
	If you believe that you have home energy costs that a 8, then fill in the excess amount of home energy costs		ne home en	nergy costs included in expenses on line		
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	our actual expen	nses, and y	ou must show that the additional	\$	0.00
29.	<b>Education expenses for dependent children who</b> \$160.42* per child) that you pay for your dependent opublic elementary or secondary school.					
	You must give your case trustee documentation of you claimed is reasonable and necessary and not already					
	* Subject to adjustment on 4/01/19, and every 3 years	s after that for c	ases begur	n on or after the date of adjustment.	\$	0.00
30.	<b>Additional food and clothing expense.</b> The monthl higher than the combined food and clothing allowance than 5% of the food and clothing allowances in the IR	es in the IRS Na	ational Star			
	To find a chart showing the maximum additional allow instructions for this form. This chart may also be available.					
	You must show that the additional amount claimed is	reasonable and	d necessary	y.	\$	38.00
31.	<b>Continuing charitable contributions.</b> The amount transfer instruments to a religious or charitable organization.			ntribute in the form of cash or financial	+\$	0.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	240.14

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Debtor 1 Jennifer Lee Plyler Case number (if known)

Dedu	ictions for Debt Payment					
lo To	pans, and other secured debt, fill in li	ayment, add all amounts that are contractually				
Ci	Mortgages on your home:	bankruptcy. Their divide by 66.				verage monthly ayment
33a.	Copy line 9b here				=> \$	3,881.20
	Loans on your first two vehicles:					
33b.	Copy line 13b here			=	=> \$	390.35
33c.					=> \$	0.00
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes insurance?		
				□ No		
	-NONE-			□ Yes	\$	
					Ψ	
				□ No		
				_ Yes	\$	
				□ No		
				☐ Yes	+\$	
					Ψ. ٦	
33e.	Total average monthly payment. Add	ines 33a through 33d	\$	4,271.55	Copy total here=>	. \$ 4,271.55
34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?						
	No. Go to line 35.					
		st pay to a creditor, in addition to the payments asion of your property (called the cure amount) information below.				
Nam	ne of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	DNE-			§ ÷	÷ 60 = \$	3
		Tot	al \$	0.00	Copy total here=>	. \$0.00
35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.						
	No. Go to line 36.					
	Yes. Fill in the total amount of all of ongoing priority claims, such a	these priority claims. Do not include current or s those you listed in line 19.				
	Total amount of all past-due	priority claims	\$	2,607.51	÷ 60 =	\$ 43.46

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ebtor 1	Jenr	nifer Lee Plyler		Ca	ase ni	umber ( <i>if knowr</i>			
	For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Bas ns for this form. Bankruptcy Basics may also be availab	<i>sics</i> speci						
	No.	Go to line 37.							
		Fill in the following information.							
		Projected monthly plan payment if you were filing under	er Chapte	r 13	\$				
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unit (for all other districts).	districts in	Alabama	X				
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.					Con	y total	
		Average monthly administrative expense if you were fi	ling under	r Chapter 13		\$		=> \$ <u> </u>	
37.		of the deductions for debt payment. es 33e through 36.						\$	4,315.01
Tota	al Deduc	tions from Income							
38.	Add all c	of the allowed deductions.							
		ne 24, All of the expenses allowed under IRS e allowances	\$	7,467.7	2				
	•	e allowances ne 32, All of the additional expense deductions	\$	240.1	4				
		ne 37, All of the deductions for debt payment	+\$	4,315.0	_				
	1 7			.,01010					
		Total deductions	\$	12,022.8	87	Copy total	here=	» \$ <u> </u>	12,022.87
art 3:	Det	termine Whether There is a Presumption of Abuse				_			
39.	Calculate	e monthly disposable income for 60 months							
	39a. Co	py line 4, adjusted current monthly income	\$	11,779.5	3				
	39b. Co	py line 38, Total deductions	- \$	12,022.8	37_				
		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-243.3	84_	Copy here=>\$		-243.34	
	For the	next 60 months (5 years)					x 60		
	39d. <b>To</b>	tal. Multiply line 39c by 60	39	9d. \$	-14	4,600.40	Copy here=>	\$	-14,600.40
40. l	Find out	whether there is a presumption of abuse. Check the	box that	applies:			_		
	■ The I	ine 39d is less than \$7,700*. On the top of page 1 of the	nis form, o	check box 1, Ti	here	is no presu	ımption of al	buse. Go to	Part 5.
		ine 39d is more than \$12,850*. On the top of page 1 o 4 if you claim special circumstances. Go to Part 5.	f this form	n, check box 2,	The	ere is a pres	umption of a	abuse. You	may fill out
	□ The I	ine 39d is at least \$7,700*, but not more than \$12,85	<b>0</b> *. Go to	line 41.					
		to adjustment on 4/01/19, and every 3 years after that for			the	date of adia	ıstment.		

Case 17-10390 Doc 1 Filed 09/08/17 Entered 09/08/17 10:15:18 Desc Main Document Page 60 of 70 Jennifer Lee Plyler Debtor 1 Case number (if known) 41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. .25 Сору 41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I) \$ here=> Multiply line 41a by 0.25..... 42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies: ☐ Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Part 4: **Give Details About Special Circumstances** 43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B). ☐ No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment Nondischargeable student loans 1,121.00

Part 5:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Jennifer Lee Plyler

Jennifer Lee Plyler

Signature of Debtor 1

Date September 8, 2017

MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-10390 Doc 1 Filed 09/08/17 Entered 09/08/17 10:15:18 Desc Main Document Page 65 of 70

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Western District of North Carolina

In re	Jennifer Lee Plyler		Case N	0.		
		Debtor(s)	Chapte	r <b>7</b>		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be p	aid to me, for service		
	For legal services, I have agreed to accept		\$	1,465.00		
	Prior to the filing of this statement I have received		\$	1,465.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	n unless they are m	embers and associate	s of my law firm.	
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the na				ıy law firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state.</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secure of the sec</li></ul>	ntement of affairs and plan whice tors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	th may be required; and any adjourned semption planni	hearings thereof;	nd filing of	
б.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			nces, relief from s	tay actions or	
		CERTIFICATION				
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement fo	or payment to me fo	or representation of th	ne debtor(s) in	
	September 8, 2017	/s/ D. Rodney Ki				
I	Date (	<b>D. Rodney Kight</b> Signature of Attorn				
		Kight Law Office	e <sup>*</sup>			
		56 College Stree Suite 302	et			
		Asheville, NC 28	8801			
		(828) 255-9881	Fax: (828) 255-9	886		
		info@kightlaw.c	om			
		rianie oj iaw jiini				

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#### United States Bankruptcy Court Western District of North Carolina

		Western District of North Caronna		
In re	Jennifer Lee Plyler		Case No.	
		Debtor(s)	Chapter	7
	VEF	ATRIX		
Γhe ab	ove-named Debtor hereby verifie	s that the attached list of creditors is true and corn	rect to the best	of his/her knowledge.
Date:	September 8, 2017	/s/ Jennifer Lee Plyler		
	·	Jennifer Lee Plyler		

Signature of Debtor

Agricultural FCU PO Box 3419 Alexandria, VA 22302

Barclays Bank Delaware C/o Sessoms & Rogers PO Box 110564 Durham, NC 27709

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899

Brock & Scott, PLLC 1315 Westbrook Plaza Drive Winston Salem, NC 27103

Bull City Financial Solutions 2609 N. Duke St. Ste 500 Durham, NC 27704

Card Member Service POB 15153 Wilmington, DE 19886-5153

Card Services P.O. Box 13337 Philadelphia, PA 19101-3337

Cindy Cervantes 7120 SW 20th Street Fort Lauderdale, FL 33317

Citi PO Box 6034 Sioux Falls, SD 57117

Citibank PO Box 6241 Sioux Falls, SD 57117

Consumer Credit Solutions MAC Q2132-0013 POB 94423 Albuquerque, NM 87199-9833 Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193

Elite Neurodiagnostics, LLC 5825 Glenridge Dr. Building 3, Suite 101 Atlanta, GA 30328

Encompass Healthcare Billing PO Box 280113 Denver, CO 80228-0113

Equifax Credit Information Services P.O. Box 105285 Atlanta, GA 30348

Experian Credit Reporting P.O. Box 9600 Allen, TX 75013

Fed Loan Servicing PO Box 60610 Harrisburg, PA 17106

Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

Harris Regional Hospital Atten: Billing 68 Hospital Drive Sylva, NC 28779

Howard Plyler 213 Devonwood Drive Marion, NC 28752

IRS P.O. Box 7346 Philadelphia, PA 19101-7346 IRS
2303 W. Meadowview Road, Ste 200
Greensboro, NC 27407-3703

M&T Bank POB 64679 Baltimore, MD 21264-4679

Madison County Tax Office P.O. Box 351 Marshall, NC 28753

Merrick Bank PO Box 171379 Salt Lake City, UT 84117-1379

Mission Hospitals - Bankruptcy Notice 509 Biltmore Avenue Asheville, NC 28801

NC Department of Revenue P.O. Box 1168 Raleigh, NC 27602

NCB Management Services, Inc. P.O. Box 1099 Langhorne, PA 19047

Paula L. Sorenson Same as Debtor

Paula Sorensen 12635 Big Laurel Road Marshall, NC 28753

PMAB LLC PO Box 12150 Charlotte, NC 28220

Portfolio Recovery 287 Independence Virginia Beach, VA 23452 Premier Card P.O. Box 5529 Sioux Falls, SD 57117-5529

Sessoms & Rogers, P.A. P.O. Box 110564 Durham, NC 27709

Shirley Lowder 213 Devonwood Drive Marion, NC 28752

TransUnion
P.O. Box 2000
Crum Lynne, PA 19022

US Attorney 100 Otis Street Room 233 Asheville, NC 28801

US Bank P.O. Box 790408 Saint Louis, MO 63179-0408

Wells Fargo PO Box 14517 Des Moines, IA 50306

Wells Fargo Bank 301 S. Tryon Street Charlotte, NC 28282

Wells Fargo Card Services P.O. Box 6412 Carol Stream, IL 60197

Wells Fargo Home Mortgage P.O. Box 14472 Des Moines, IA 50306-0368